In re	JAMES ALLEN WILLIAMS	According to the calculations required by this statement:
	Debtor(s)	■The applicable commitment period is 3 years.
Case Number:		☐The applicable commitment period is 5 years.
	(If known)	□Disposable income is determined under § 1325(b)(3).
		<b>■</b> Disposable income is not determined under § 1325(b)(3).
		(Check the boxes as directed in Lines 17 and 23 of this statement.)

# CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

		Par	t I.	REPORT OF IN	COM	1E				
	Mari	tal/filing status. Check the box that applies a	nd c	omplete the balance	e of	this part of this state	men	nt as directed.		
1	a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10.									
	b. <b>■</b> N	Married. Complete both Column A ("Debtor	's I	ncome'') and Coli	ımn	B ("Spouse's Incom	ie'')	for Lines 2-10.		
	All figures must reflect average monthly income received from all sources, derived during the six							Column A		Column B
		dar months prior to filing the bankruptcy case								
	the filing. If the amount of monthly income varied during the six months, you must divide the							Debtor's Income		Spouse's Income
	sıx-m	onth total by six, and enter the result on the a	ppro	opriate line.				Theome		nicome
2	Gross	s wages, salary, tips, bonuses, overtime, con	nmi	ssions.			\$	0.00	\$	0.00
3	Income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 3. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part IV.									
	-	Cint-	\$	Debtor 0.00	ď	Spouse				
	a. b.	Gross receipts Ordinary and necessary business expenses	\$	0.00		0.00				
	c.	Business income		btract Line b from			\$	0.00	\$	0.00
	Rents	s and other real property income. Subtract 1	Line	b from Line a and	ente	er the difference in				
	the appropriate column(s) of Line 4. Do not enter a number less than zero. <b>Do not include any</b>									
	part o	of the operating expenses entered on Line b	as		t IV					
4		T.	1	Debtor		Spouse				
	a.	Gross receipts	\$	0.00 0.00		0.00				
	b.	Ordinary and necessary operating expenses  Rent and other real property income	\$	ubtract Line b from		0.00	\$	0.00	\$	0.00
			St	ibilact Line o non	LIII	e a	<del>l ·</del>	0.00	Ф	0.00
5	Inter	est, dividends, and royalties.					\$	0.00	\$	0.00
6	Pensi	ion and retirement income.					\$	3,230.54	\$	0.00
7	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B.					\$	0.00	\$	0.00	
8	Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8.  However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act. do not list the amount of such compensation in Column A									
		mployment compensation claimed to benefit under the Social Security Act Debtor	r \$	<b>0.00</b> Sp	ouse	\$ 0.00	\$	0.00	\$	0.00

9	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. Do not include alimony or separate maintenance payments paid by your spouse, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.					
	Debtor Spouse					
	a.	0.00	\$	0.00		
10	Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 in Column B. Enter the total(s).	3,230.54		0.00		
11	<b>Total.</b> If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.			3,230.54		
	Part II. CALCULATION OF § 1325(b)(4) COMMITMENT PERIOR	D				
12	Enter the amount from Line 11	\$		3,230.54		
13	Marital Adjustment. If you are married, but are not filing jointly with your spouse, AND if you contend the calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income of your senter on Line 13 the amount of the income listed in Line 10, Column B that was NOT paid on a regular basis the household expenses of you or your dependents and specify, in the lines below, the basis for excluding the income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustion a separate page. If the conditions for entering this adjustment do not apply, enter zero.    a.	pouse, s for is r or the				
	Total and enter on Line 13	\$		0.00		
14	Subtract Line 13 from Line 12 and enter the result.	\$		3,230.54		
15	Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the number enter the result.	12 and \$		38,766.48		
16	<b>Applicable median family income.</b> Enter the median family income for applicable state and household size information is available by family size at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)	. (This				
	a. Enter debtor's state of residence: TN b. Enter debtor's household size: 2	\$		48,725.00		
17	<ul> <li>Application of § 1325(b)(4). Check the applicable box and proceed as directed.</li> <li>■ The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commit top of page 1 of this statement and continue with this statement.</li> <li>□ The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable commit the top of page 1 of this statement and continue with this statement.</li> </ul>					
	Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSABLE INCO	OME				
18	Enter the amount from Line 11.	\$		3,230.54		
19	Marital Adjustment. If you are married, but are not filing jointly with your spouse, enter on Line 19 the total of any income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income(such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero.					
	b.					
	Total and enter on Line 19.	\$		0.00		
20	Current monthly income for § 1325(b)(3). Subtract Line 19 from Line 18 and enter the result.	\$		3,230.54		
21	Annualized current monthly income for § 1325(b)(3). Multiply the amount from Line 20 by the number 1 enter the result.	2 and \$		38,766.48		

22	Applic	able median family incom	e. Enter the amount from	m Lin	e 16.		\$	48,725.00
	Applic		•					
23		sposable income is determine this statement.	ned und	ler §				
		<b>amount on Line 21 is not</b> 25(b)(3)" at the top of page						
		Part IV. CA	ALCULATION (	)F I	DEDUCTIONS FR	OM INCOME		
		Subpart A: D	eductions under Star	ndar	ls of the Internal Rev	enue Service (IRS)		
24A	National Standards: food, apparel and services, housekeeping supplies, personal care, and miscellaneous.  Enter in Line 24A the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable number of persons. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.						\$	
24B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons 65 and older, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B.							
	Perso	ns under 65 years of age		Pers	ons 65 years of age or ol	der		
	a1.	Allowance per person		a2.	Allowance per person	ance per person		
	b1.	Number of persons		b2.	Number of persons			
	c1.	Subtotal		c2.	Subtotal		\$	
25A	Utilitie availab	Standards: housing and uses Standards; non-mortgage ole at www.usdoj.gov/ust/onber that would currently builditional dependents whom	expenses for the application of the beallowed as exemption	able c ankru	ounty and family size. (T ptcy court). The applicab	his information is le family size consists of	\$	
25B	Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero.							
		IRS Housing and Utilities						
	b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47 \$							
	c.	Net mortgage/rental expens	se		Subtract Line b f	rom Line a.	\$	
26	25B do Standa	Standards: housing and uses not accurately computerds, enter any additional and tion in the space below:	the allowance to which	you a	re entitled under the IRS l	Housing and Utilities	¢	
							\$	

	Local Standards: transportation; vehicle operation/public transportation expense allowance in this category regardless of whether you pay the regardless of whether you use public transportation.  Check the number of vehicles for which you pay the operating expense.	expenses of operating a vehicle and ses or for which the operating expenses are					
27A	included as a contribution to your household expenses in Line 7.   10 If you checked 0, enter on Line 27A the "Public Transportation" amount of the contribution of th						
	Transportation. If you checked 1 or 2 or more, enter on Line 27A the Standards: Transportation for the applicable number of vehicles in the Census Region. (These amounts are available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a>	"Operating Costs" amount from IRS Local e applicable Metropolitan Statistical Area or	\$				
27B	Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 27B the "Public Transportation" amount from the IRS Local Standards: Transportation. (This amount is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)						
	<b>Local Standards: transportation ownership/lease expense; Vehicle 1.</b> Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two						
28	vehicles.) □1 □2 or more.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy of Monthly Payments for any debts secured by Vehicle 1, as stated in Little result in Line 28. <b>Do not enter an amount less than zero.</b>	court); enter in Line b the total of the Average					
	a. IRS Transportation Standards, Ownership Costs  Average Monthly Payment for any debts secured by Vehicle	\$					
	b. 1, as stated in Line 47	\$ Subtract Line b from Line a.	\$				
	C.   Net ownership/lease expense for Vehicle 1   Subtract Line b from Line a.						
29	the "2 or more" Box in Line 28.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. <b>Do not enter an amount less than zero.</b>						
	a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle	\$					
	b. 2, as stated in Line 47	\$	_				
	c. Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$				
30	Other Necessary Expenses: taxes. Enter the total average monthly e state, and local taxes, other than real estate and sales taxes, such as insecurity taxes, and Medicare taxes. Do not include real estate or sales	come taxes, self employment taxes, social	\$				
31	Other Necessary Expenses: involuntary deductions for employment deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as volu	retirement contributions, union dues, and	\$				
	Other Necessary Expenses: life insurance. Enter total average mon	<u> </u>	Ψ				
32	life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.						
33	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in line 49.						
34	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.						
35	Other Necessary Expenses: childcare. Enter the total average mont childcare - such as baby-sitting, day care, nursery and preschool. <b>Do</b>		\$				
36	other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on						

37	Other actuall pagers welfare	\$					
38	Total 1	\$					
		<b>-</b>	onal Living Expense Deductions spenses that you have listed in Lines 24-37				
	<b>Health Insurance, Disability Insurance, and Health Savings Account Expenses.</b> List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.						
39	a.	Health Insurance	\$				
	b.	Disability Insurance	\$				
	c.	Health Savings Account	\$				
	Total a	and enter on Line 39		\$			
	If you below:		e your actual total average monthly expenditures in the space				
40	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34.						
41	<b>Protection against family violence.</b> Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.						
42	Home Standa truste claime	\$					
43	Educa actuall school docum necess	\$					
44	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.						
45	Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income.						
46							

		Subpart C: Deductions for De	ebt Payment					
47	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of creditor, identify the property securing the debt, state the Average Monthly Payment, and							
	Name of Creditor							
			Total: Add Line	s Ino	\$			
48	motor vehicle, or other property nyour deduction 1/60th of any amo payments listed in Line 47, in order sums in default that must be paid the following chart. If necessary, l	ns. If any of debts listed in Line 47 are secessary for your support or the support of unt (the "cure amount") that you must payer to maintain possession of the property. In order to avoid repossession or forecloss ist additional entries on a separate page.	f your dependents, the creditor in add The cure amount ware. List and total ar	you may include in ition to the ould include any ny such amounts in				
	Name of Creditor	Property Securing the Debt		the Cure Amount				
	a.		\$	Total: Add Lines	\$			
49	priority tax, child support and alin not include current obligations, a Chapter 13 administrative exper	r claims. Enter the total amount, divided nony claims, for which you were liable at such as those set out in Line 33.  Ses. Multiply the amount in Line a by the	the time of your bar	nkruptcy filing. <b>Do</b>	\$			
	resulting administrative expense.  a. Projected average monthl	y Chapter 13 plan payment.	<b> </b> \$					
50	b. Current multiplier for you issued by the Executive C	r district as determined under schedules ffice for United States Trustees. (This www.usdoj.gov/ust/ or from the clerk of						
	c. Average monthly adminis	trative expense of chapter 13 case	Total: Multiply I	ines a and b	\$			
51	Total Deductions for Debt Paym	ent. Enter the total of Lines 47 through 5	50.		\$			
		Subpart D: Total Deductions	From Income					
52	Total of all deductions from inco	<b>me.</b> Enter the total of Lines 38, 46, and 3	51.		\$			
	Part V. DETERN	MINATION OF DISPOSABLE	INCOME UND	ER § 1325(b)(2)	)			
53	Total current monthly income. Enter the amount from Line 20.							
54	Support income. Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I, that you received in accordance with applicable nonbankruptcy law, to the extent reasonably necessary to be expended for such child.							
55		Enter the monthly total of (a) all amound retirement plans, as specified in § 541(scified in § 362(b)(19).			\$			
56	Total of all deductions allowed u	nder § 707(b)(2). Enter the amount from	Line 52.		\$			

57	Dedu there If neo provi					
		Nature of special circumstances	Amo	ount of Expense		
	a.		\$			
	b.		\$			
	c.		\$			
			Tota	al: Add Lines	\$	
58	Total result	adjustments to determine disposable income. Add the amounts on L.	ines	54, 55, 56, and 57 and enter the	\$	
59	Mon	thly Disposable Income Under § 1325(b)(2). Subtract Line 58 from Li	ine 5	3 and enter the result.	\$	
		Part VI. ADDITIONAL EXPEN	SE (	CLAIMS		
	<b>Other Expenses.</b> List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for					

each item. Total the expenses. Expense Description Monthly Amount b. \$ \$

\$ Total: Add Lines a, b, c and d

#### Part VII. VERIFICATION

I declare under penalty of perjury that the information provided in this statement is true and correct. (If this is a joint case, both debtors must sign.)

60

61

Date: July 24, 2012 Signature: /s/ JAMES ALLEN WILLIAMS

JAMES ALLEN WILLIAMS

(Debtor)

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# **Current Monthly Income Details for the Debtor**

## **Debtor Income Details:**

Income for the Period 01/01/2012 to 06/30/2012.

#### Line 6 - Pension and retirement income

Source of Income: **PENSION** 

Income by Month:

6 Months Ago:	01/2012	\$3,230.54
5 Months Ago:	02/2012	\$3,230.54
4 Months Ago:	03/2012	\$3,230.54
3 Months Ago:	04/2012	\$3,230.54
2 Months Ago:	05/2012	\$3,230.54
Last Month:	06/2012	\$3,230.54
	Average per month:	\$3,230,54

## Non-CMI - Social Security Act Income

Source of Income: SOCIAL SECURITY

Income by Month:

6 Months Ago:	01/2012	\$1,900.00
5 Months Ago:	02/2012	\$1,900.00
4 Months Ago:	03/2012	\$1,900.00
3 Months Ago:	04/2012	\$1,900.00
2 Months Ago:	05/2012	\$1,900.00
Last Month:	06/2012	\$1,900.00
	Average per month:	\$1,900.00

# **Current Monthly Income Details for the Debtor's Spouse**

## **Spouse Income Details:**

Income for the Period **01/01/2012** to **06/30/2012**.

## Non-CMI - Social Security Act Income Source of Income: SOCIAL SECURITY

Income by Month:

6 Months Ago:	01/2012	\$1,000.00
5 Months Ago:	02/2012	\$1,000.00
4 Months Ago:	03/2012	\$1,000.00
3 Months Ago:	04/2012	\$1,000.00
2 Months Ago:	05/2012	\$1,000.00
Last Month:	06/2012	\$1,000.00
	Average per month:	\$1,000.00